CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

STATEMENT OF ECONOMIC INTERESTS
COVER PAGE
A PUBLIC DOCUMENT

Date Initial Filing Received
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Filed Date: 03/22/2021 04:23 PM
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Please type or print in ink.

NAME OF FILER (LAST): Miller (FIRST): Lisa (MIDDLE):

1. Office, Agency, or Court

Agency Name *(Do not use acronyms)*: Police

Division, Board, Department, District, if applicable:

Your Position: Hearing Examiner

► If filing for multiple positions, list below or on an attachment. *(Do not use acronyms)*

Agency: _____ Position: _____

2. Jurisdiction of Office *(Check at least one box)*

- ☐ State
- ☐ Multi-County _____
- ☒ City of Los Angeles
- ☐ Judge, Retired Judge, Pro Tem Judge, or Court Commissioner (Statewide Jurisdiction)
- ☐ County of _____
- ☐ Other _____

3. Type of Statement *(Check at least one box)*

☒ **Annual:** The period covered is January 1, **2020,** through December 31, **2020**.

-or-

The period covered is _____/_____/_____, through December 31, **2020**.

☐ **Assuming Office:** Date assumed _____/_____/_____

☐ **Leaving Office:** Date Left _____/_____/_____
(Check one circle.)

○ The period covered is January 1, **2020**, through the date of leaving office.

-or-

○ The period covered is _____/_____/_____, through the date of leaving office.

☐ **Candidate:** Date of Election _____ and office sought, if different than Part 1: _____

4. Schedule Summary (must complete) ► *Total number of pages including this cover page:* 5

Schedules attached

- ☒ **Schedule A-1 -** *Investments* – schedule attached
- ☒ **Schedule A-2 -** *Investments* – schedule attached
- ☒ **Schedule B -** *Real Property* – schedule attached
- ☒ **Schedule C -** *Income, Loans, & Business Positions* – schedule attached
- ☐ **Schedule D -** *Income – Gifts* – schedule attached
- ☐ **Schedule E -** *Income – Gifts – Travel Payments* – schedule attached

-or- ☐ ***None*** **-** *No reportable interests on any schedule*

5. Verification

MAILING ADDRESS *(Business or Agency Address Recommended - Public Document)*: 100 West 1st Street, Room 1061, Stop 400, DCR / 221 N. Figueroa St, Suite 1245
STREET:
CITY: Los Angeles
STATE: CA
ZIP CODE: 90012

DAYTIME TELEPHONE NUMBER: (213) 486-8730

EMAIL ADDRESS:

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 03/22/2021 04:23 PM
(month, day, year)

Signature Electronic Submission
(File the originally signed paper statement with your filing official.)

SCHEDULE A-1
Investments
Stocks, Bonds, and Other Interests
(Ownership Interest is Less Than 10%)

Investments must be itemized.
Do not attach brokerage or financial statements.

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name: Lisa Miller

► NAME OF BUSINESS ENTITY: Wells Fargo IRA

GENERAL DESCRIPTION OF THIS BUSINESS: IRA/Bank

FAIR MARKET VALUE
- ☐ $2,000 - $10,000
- ☒ $10,001 - $100,000
- ☐ $100,001 - $1,000,000
- ☐ Over $1,000,000

NATURE OF INVESTMENT
- ☐ Stock
- ☒ Other IRA (Describe)
- ☐ Partnership
  - ○ Income Received of $0 - $499
  - ○ Income Received of $500 or More *(Report on Schedule C)*

IF APPLICABLE, LIST DATE:

01 / 01 / 20 ACQUIRED ___/___/ 20 DISPOSED

► NAME OF BUSINESS ENTITY:

GENERAL DESCRIPTION OF THIS BUSINESS:

FAIR MARKET VALUE
- ☐ $2,000 - $10,000
- ☐ $10,001 - $100,000
- ☐ $100,001 - $1,000,000
- ☐ Over $1,000,000

NATURE OF INVESTMENT
- ☐ Stock
- ☐ Other (Describe)
- ☐ Partnership
  - ○ Income Received of $0 - $499
  - ○ Income Received of $500 or More *(Report on Schedule C)*

IF APPLICABLE, LIST DATE:

___/___/ 20 ACQUIRED ___/___/ 20 DISPOSED

► NAME OF BUSINESS ENTITY:

GENERAL DESCRIPTION OF THIS BUSINESS:

FAIR MARKET VALUE
- ☐ $2,000 - $10,000
- ☐ $10,001 - $100,000
- ☐ $100,001 - $1,000,000
- ☐ Over $1,000,000

NATURE OF INVESTMENT
- ☐ Stock
- ☐ Other (Describe)
- ☐ Partnership
  - ○ Income Received of $0 - $499
  - ○ Income Received of $500 or More *(Report on Schedule C)*

IF APPLICABLE, LIST DATE:

___/___/ 20 ACQUIRED ___/___/ 20 DISPOSED

► NAME OF BUSINESS ENTITY:

GENERAL DESCRIPTION OF THIS BUSINESS:

FAIR MARKET VALUE
- ☐ $2,000 - $10,000
- ☐ $10,001 - $100,000
- ☐ $100,001 - $1,000,000
- ☐ Over $1,000,000

NATURE OF INVESTMENT
- ☐ Stock
- ☐ Other (Describe)
- ☐ Partnership
  - ○ Income Received of $0 - $499
  - ○ Income Received of $500 or More *(Report on Schedule C)*

IF APPLICABLE, LIST DATE:

___/___/ 20 ACQUIRED ___/___/ 20 DISPOSED

► NAME OF BUSINESS ENTITY:

GENERAL DESCRIPTION OF THIS BUSINESS:

FAIR MARKET VALUE
- ☐ $2,000 - $10,000
- ☐ $10,001 - $100,000
- ☐ $100,001 - $1,000,000
- ☐ Over $1,000,000

NATURE OF INVESTMENT
- ☐ Stock
- ☐ Other (Describe)
- ☐ Partnership
  - ○ Income Received of $0 - $499
  - ○ Income Received of $500 or More *(Report on Schedule C)*

IF APPLICABLE, LIST DATE:

___/___/ 20 ACQUIRED ___/___/ 20 DISPOSED

Comments:

SCHEDULE A-2
Investments, Income, and Assets of Business Entities/Trusts
(Ownership Interest is 10% or Greater)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name: Lisa Miller

▶ 1. BUSINESS ENTITY OR TRUST

Name: Lex Law Corp.

Address *(Business Address Acceptable)*: 12003 Hartsook Street, Suite D, Valley Village, CA

Check one
- [ ] Trust, *go to 2*
- [x] Business Entity, *complete the box, then go to 2*

GENERAL DESCRIPTION OF THIS BUSINESS: Small law firm

FAIR MARKET VALUE
- [ ] $0 - $1,999
- [ ] $2,000 - $10,000
- [x] $10,001 - $100,000
- [ ] $100,001 - $1,000,000
- [ ] Over $1,000,000

IF APPLICABLE, LIST DATE:
___/___/20 ACQUIRED
___/___/20 DISPOSED

NATURE OF INVESTMENT
- [ ] Partnership
- [ ] Sole Proprietorship
- [x] LLC (Other)

YOUR BUSINESS POSITION: CEO

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

- [ ] $0 - $499
- [ ] $500 - $1,000
- [ ] $1,001 - $10,000
- [x] $10,001 - $100,000
- [ ] OVER $100,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE (Attach a separate sheet if necessary.)

- [x] None or
- [ ] Names listed below

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:
- [ ] INVESTMENT
- [ ] REAL PROPERTY

Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or
City or Other Precise Location of Real Property

FAIR MARKET VALUE
- [ ] $2,000 - $10,000
- [ ] $10,001 - $100,000
- [ ] $100,001 - $1,000,000
- [ ] Over $1,000,000

IF APPLICABLE, LIST DATE:
___/___/20 ACQUIRED
___/___/20 DISPOSED

NATURE OF INTEREST
- [ ] Property Ownership/Deed of Trust
- [ ] Stock
- [ ] Partnership
- [ ] Leasehold ____ Yrs. remaining
- [ ] Other ____

- [ ] Check box if additional schedules reporting investments or real property are attached

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▶ 1. BUSINESS ENTITY OR TRUST

Name: LA Lawyers Club Online Bar

Address *(Business Address Acceptable)*: 12003 Hartsook Street, Suite B, Valley Vilage, CA 91607

Check one
- [ ] Trust, *go to 2*
- [x] Business Entity, *complete the box, then go to 2*

GENERAL DESCRIPTION OF THIS BUSINESS: Education

FAIR MARKET VALUE
- [x] $0 - $1,999
- [ ] $2,000 - $10,000
- [ ] $10,001 - $100,000
- [ ] $100,001 - $1,000,000
- [ ] Over $1,000,000

IF APPLICABLE, LIST DATE:
01/01/20 ACQUIRED
___/___/20 DISPOSED

NATURE OF INVESTMENT
- [ ] Partnership
- [ ] Sole Proprietorship
- [x] LLC (Other)

YOUR BUSINESS POSITION: CEO

▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)

- [x] $0 - $499
- [ ] $500 - $1,000
- [ ] $1,001 - $10,000
- [ ] $10,001 - $100,000
- [ ] OVER $100,000

▶ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF $10,000 OR MORE (Attach a separate sheet if necessary.)

- [x] None or
- [ ] Names listed below

▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD OR LEASED BY THE BUSINESS ENTITY OR TRUST

Check one box:
- [ ] INVESTMENT
- [ ] REAL PROPERTY

Name of Business Entity, if Investment, or
Assessor's Parcel Number or Street Address of Real Property

Description of Business Activity or
City or Other Precise Location of Real Property

FAIR MARKET VALUE
- [ ] $2,000 - $10,000
- [ ] $10,001 - $100,000
- [ ] $100,001 - $1,000,000
- [ ] Over $1,000,000

IF APPLICABLE, LIST DATE:
___/___/20 ACQUIRED
___/___/20 DISPOSED

NATURE OF INTEREST
- [ ] Property Ownership/Deed of Trust
- [ ] Stock
- [ ] Partnership
- [ ] Leasehold ____ Yrs. remaining
- [ ] Other ____

- [ ] Check box if additional schedules reporting investments or real property are attached

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Comments: Lex Law Corp. owns no fixed assets. LA Lawyers Club has no income.

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name
Lisa Miller

SCHEDULE B
Interests in Real Property
(Including Rental Income)

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
12003 Hartsook St

CITY
Valley Village, CA

FAIR MARKET VALUE
- ☐ $2,000 - $10,000
- ☐ $10,001 - $100,000
- ☒ $100,001 - $1,000,000
- ☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
___/___/ 20__ ACQUIRED ___/___/ 20__ DISPOSED

NATURE OF INTEREST
- ☒ Ownership/Deed of Trust
- ☐ Easement
- ☐ Leasehold _____ Yrs. remaining
- ☐ _____ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
- ☐ $0 - $499
- ☐ $500 - $1,000
- ☐ $1,001 - $10,000
- ☒ $10,001 - $100,000
- ☐ OVER $100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.

☐ None

Carl S.

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

CITY

FAIR MARKET VALUE
- ☐ $2,000 - $10,000
- ☐ $10,001 - $100,000
- ☐ $100,001 - $1,000,000
- ☐ Over $1,000,000

IF APPLICABLE, LIST DATE:
___/___/ 20__ ACQUIRED ___/___/ 20__ DISPOSED

NATURE OF INTEREST
- ☐ Ownership/Deed of Trust
- ☐ Easement
- ☐ Leasehold _____ Yrs. remaining
- ☐ _____ Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
- ☐ $0 - $499
- ☐ $500 - $1,000
- ☐ $1,001 - $10,000
- ☐ $10,001 - $100,000
- ☐ OVER $100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of $10,000 or more.

☐ None

* You are not required to report loans from a commercial lending institution made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE _____% ☐ None

TERM (Months/Years)

HIGHEST BALANCE DURING REPORTING PERIOD
- ☐ $500 - $1,000
- ☐ $1,001 - $10,000
- ☐ $10,001 - $100,000
- ☐ OVER $100,000

☐ Guarantor, if applicable

NAME OF LENDER*

ADDRESS *(Business Address Acceptable)*

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE _____% ☐ None

TERM (Months/Years)

HIGHEST BALANCE DURING REPORTING PERIOD
- ☐ $500 - $1,000
- ☐ $1,001 - $10,000
- ☐ $10,001 - $100,000
- ☐ OVER $100,000

☐ Guarantor, if applicable

Comments: _____

SCHEDULE C
Income, Loans, & Business Positions
(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name: Lisa Miller

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME: Lex Law Corp.

ADDRESS *(Business Address Acceptable)*: 12003 Hartsook Street, Suite D, Valley Village, CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE: Small law firm

YOUR BUSINESS POSITION: CEO

GROSS INCOME RECEIVED
- [ ] No Income - Business Position Only
- [ ] $500 - $1,000
- [ ] $1,001 - $10,000
- [x] $10,001 - $100,000
- [ ] OVER $100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
- [ ] Salary
- [ ] Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)
- [ ] Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
- [ ] Sale of _____ *(Real property, car, boat, etc.)*
- [ ] Loan repayment
- [ ] Commission or
- [ ] Rental Income, *list each source of $10,000 or more*

_____ *(Describe)*

- [x] Other SBA loan *(Describe)*

▶ 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME: _____

ADDRESS *(Business Address Acceptable)*: _____

BUSINESS ACTIVITY, IF ANY, OF SOURCE: _____

YOUR BUSINESS POSITION: _____

GROSS INCOME RECEIVED
- [ ] No Income - Business Position Only
- [ ] $500 - $1,000
- [ ] $1,001 - $10,000
- [ ] $10,001 - $100,000
- [ ] OVER $100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED
- [ ] Salary
- [ ] Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)
- [ ] Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)
- [ ] Sale of _____ *(Real property, car, boat, etc.)*
- [ ] Loan repayment
- [ ] Commission or
- [ ] Rental Income, *list each source of $10,000 or more*

_____ *(Describe)*

- [ ] Other _____ *(Describe)*

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

* You are not required to report loans from a commercial lending institution, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*: US Govt - pandemic EIDL loan

ADDRESS *(Business Address Acceptable)*: Portlnd, OR

BUSINESS ACTIVITY, IF ANY, OF LENDER: Governance

HIGHEST BALANCE DURING REPORTING PERIOD
- [ ] $500 - $1,000
- [x] $1,001 - $10,000
- [ ] $10,001 - $100,000
- [ ] OVER $100,000

INTEREST RATE: 2 % [ ] None

TERM (Months/Years): 10 years

SECURITY FOR LOAN
- [x] None
- [ ] Personal residence
- [ ] Real Property _____ *Street address*

_____ *City*

- [ ] Guarantor _____
- [ ] Other _____ *(Describe)*

Comments: _____